

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

Full Name (Last, First, Middle Initial)

A. Charles A. Griffis

Mailing Address 1237 Carmona Ave

City

Los Angeles

State

CA

Zip Code

90019-2531

FEC ID number of contributing
federal political committee.

C

Name of Employer

West LA VA Medical Center

Occupation

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : 9749494CB65A42DF8FBC

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mary Lou G. Guillot

Mailing Address 45085 Riverside Est

City

Saint Amant

State

LA

Zip Code

70774-4212

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : 00B9A6302FDA4B328168

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Paul M. Haas

Mailing Address 50 Park Ter E
6AF

City

New York

State

NY

Zip Code

10034-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : 4AB4B88AF41866B221A5

Amount of Each Receipt this Period

30.41

SUBTOTAL of Receipts This Page (optional)..... ►

1130.41

TOTAL This Period (last page this line number only)..... ►